* 0 0 0 0 0 5 0 3 8 *

Statement of Organizatio...

RECEIVED

Candidates, Political Action or Ballot Question Committees 28 2003

S.D. SEC. OF STATE

State law requires statewide and legislative candidate committees, political action committees (PAC) and ballot question committees to register with the Secretary of State. Candidate committees must register within fifteen days after becoming a candidate. Candidate committees that have not already filed a statement of organization, PACs and ballot question committees must register not later than fifteen days after the date upon which the committee made contributions, received contributions or paid expenses in excess of five hundred dollars unless such activity falls within thirty days of any statewide election in which case the statement of organization shall be filed within forty-eight hours.

Full Name of Committee:lan_	Hunhoff for Senak	
Street Address: 25/1 Mulliga	in Drive youth 50 5700)
Postal Address:	U	
Name of Chair: Matt Mich	k 13	28
Chair Daytime Telephone Number:	105-665-8709	Filed this day of
Street Address: 1213 Walnuf	St. Yaufm 51) 57118	Chi Molan
Postal Address: Same us Think	•	SECRETARY OF STATE
Name of Treasurer:	_	
Treasurer Daytime Telephone Numbe	r: 605-267-4151	
Street Address: 44 9 50 310	4h 54. Gayville, 5.0. 57	'D3/
Postal Address: 57m. us april	e	
You must list the name, street address an account or depository is maintained	s, postal address and telephone number of eac d.	h financial institution where
Name of Financial Institution	Street and Postal Address	Telephone Number
First Nettonal Bank	332 Broadway	608-665-9611

If you are a political action committee or a ballot question committee, you must include a concise statement of your purpose and goals.

Statement of December 2 of C	-1	Appendix A
Statement of Purpose and Go	oals:	
40.00		
	**	
address, and postal address of	of the organization with which the cor	ttee, you must list the full name, street mmittee is connected or affiliated, or if the n, the trade, profession, or primary interest of
Name of Organization:		
	¥-	
Street and Postal Address: _		
Trade, profession, or primar	ry interest of the committee:	
The second of the second		
Charle harm if your come		
Check here if your com	imittee is incorporated under federal c	or state laws for liability purposes only.
The following verification a	must be completed before submitting	statement
Tree journey very grounders	s vo vomprosou vojore suomums	Bottom Comments
VERIFICATION OF PERS	ONS MAKING REPORT	
	E &	
We	(print	t both names legibly), certify that we have lief it is true, correct and complete. We also
	wil penalty of fifty dollars per day for	or correction required subjects the treasurer
delinquent.	vir penalty of fifty donars per day for	each day that the statement remains
D / / /	MILLER	
Date:	/ / / n///////	[
	Signature of candidate or	chair
Date: $\frac{3}{108}$	Mole Cricken	
Date: $\frac{\mathcal{O}}{\mathcal{O}}$	Signature of treasure	<u> </u>
*	orginature of treasure	1
		an updated statement of organization not
of organization.	er any change in the information co	ntained on the most recently filed statement
~- ^- P.	Submit Statement of Organ	nization to:

Submit Statement of Organization to:
Secretary of State, Elections Department
500 East Capitol Ave., Ste 204
Pierre, SD 57501
or fax to 605-773-6580 or email to kea.warne@state.sd.us
Fax and email images must contain the signature(s) and the original must be filed in our office within one week following the date the fax/email was received.

County, municipal and school candidates file with the person in charge of the local election.

New 7-1-07